

CITY OF RIVERDALE

Public Presentation Request Form

Date: _____

Provide Organization/Individual _____

Address: _____
Street City/State/Zip Code

City Resident ☐ Yes ☐ No

Telephone Number: _____

Proposed Meeting Date & Time: _____

Purpose of presentation (please include your organization's objective and any pertinent background history (you may email attachments to stthomas@riverdalega.gov or fax tem to 770-997-8992 attention: Office of the City Clerk)

Please indicate whether the presentation will require proclamation/certificate.

☐ Yes ☐ No If *yes*, please allow the Office of the City Clerk two (2) weeks advance notice in order to properly schedule the recognition for a city council meeting.

Please indicate whether you will provide the proclamation/certificates or if you require the services of the City Clerk to draft one for your organization.

☐ Yes ☐ No

If approved, please indicate whether your presentation will require a projection device. ☐ Yes ☐ No

Reviewed by City Clerk: _____ Date: _____

OFFICIAL USE ONLY

Scheduled Council or Board meeting date: _____

Check one: ☐ APPROVED ☐ TABLED ☐ DENIED

Any changes requested by the City Manager, Mayor and Council or City Clerk?

☐ Yes ☐ No

Comments and/or changes? _____

Signature executed? Mayor or Mayor Pro tem ☐ Yes ☐ No

Return to Office of the City Clerk (signed), if applicable: _____ Date: _____